







POLYTRAUMA AND TRAUMATIC BRAIN INJURY

The U.S. Department of Veterans Affairs (VA) provides medical and rehabilitation services to Veterans and Service members with traumatic brain injury (TBI). VA's Polytrauma/TBI System of Care is a nationwide network of over 110 facilities. Specialized rehabilitation programs and services are coordinated across four tiers of care to provide the right expertise at the right time and location.

WHAT IS TRAUMATIC BRAIN INJURY (TBI)?

TBI may happen from a blow to the head, or an object penetrating the brain. Falls and vehicular accidents are the most common causes of TBI. TBI can occur during combat, training and civilian activities. Care for TBI occurs in both inpatient and outpatient settings. Interdisciplinary teams collaborate with Veterans and families to address individualized goals throughout the continuum of recovery across the veteran's lifespan.

TBI SYMPTOMS

- Mild TBI may result in headaches, dizziness, and changes in sleep, behavior and cognition. Symptoms resolve within weeks to months in most individuals. Common co-occurring conditions may prolong recovery for some.
- In cases of moderate to severe TBI / Polytrauma, symptoms can be life-threatening and result in chronic health problems and long-term functional disability.

TBI SCREENING

- VA screens all post-9/11
 Veterans with a history of
 military deployment for
 possible TBI on their initial
 entry into VA health care.
- Veterans with positive TBI screen are referred to specialty providers for comprehensive evaluation and to develop a plan of care, as necessary.
- Case Managers are assigned to assist Veterans by coordinating services and resources to optimize rehabilitation outcomes.

TBI OUTCOMES

- VA tracks TBI rehabilitation outcomes for Veterans treated in the five VA Polytrauma Rehabilitation Centers and compares these with outcomes for patients treated in the private sector through collaborative research with the Traumatic Brain Injury Model Systems.
- VA outcomes compare favorably to those from the civilian TBIMS in the percentages of patients discharged to home and those living independently years following rehabilitation.

